

Office of the Town Clerk
600 Chief Justice Cushing Way
Scituate, MA 02066
(781) 545-8743

2016
DOG LICENSE

Section 30400 of the Town of Scituate General By-Laws mandates the yearly licensing of all dogs. Every dog age six (6) months or older must be licensed by **July 1st** each year. Existing dog licenses expire June 30th. Licensing and re-licensing begins May 25th.

Fees are: Male/Female.....\$15.00 each dog
Neutered/Spayed.....\$10.00 each dog

Licensing is available at the Town Clerk's Office during regular business hours. However, for your convenience, you will find an application form following this notice. The application form enables you to license your dog(s) by mail. Please complete the form and enclose it in an envelope marked **DOG LICENSE.**

Please check that the envelope contains the following:

1. The application form.
2. The required documentation (copy of rabies certificate and copy of neutering/spaying certificate).
3. A check - payable to the Town of Scituate. **This check must be separate from the check for the beach/transfer station sticker program.**
4. A stamped, self-addressed **LETTER** size envelope for return mailing of the 2016 dog tag to you. *If a stamped, self-addressed envelope is not included, please add .50 to the amount of the check.*

NOTE: The Town Clerk's Office receives notification from all local veterinarians when a Scituate dog is vaccinated. This office maintains a list of all unlicensed dogs in the town. Each owner with an unlicensed dog will be identified as being in violation of the Animal Control By-law. Failure to license by October 1st shall result in the fee doubling. Additionally, (Section 30430) there is a fine of \$25 for an unlicensed dog.

PLEASE NOTIFY THIS OFFICE IF YOU NO LONGER OWN A DOG.

Town of Scituate



2016 Dog License Application

Owner's Name _____

Address _____

Phone Number _____ Owner's date of birth _____



1st Dog

Dog's Name _____ Breed _____

Color _____ Year of Birth _____



2nd Dog

Dog's Name _____ Breed _____

Color _____ Year of Birth _____



3rd Dog

Dog's Name _____ Breed _____

Color _____ Year of Birth _____



Please include:

- Proof of **rabies vaccination.**
- Proof of **neutering and/or spaying.**
- A self-addressed **STAMPED letter** size envelope or include an additional .50 for postage in the check.
- A check made payable to the **Town of Scituate** for:
 - If the dog(s) has **NOT** been neutered or spayed, \$15.00 per dog.
 - Neutered or spayed, \$10.00 per dog.

ANY PREMISES HOUSING FOUR (4) OR MORE DOGS REQUIRES A KENNEL LICENSE. APPLICATIONS ARE AVAILABLE AT THE TOWN CLERK'S OFFICE- 781-545-8743.